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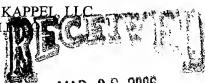
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03/01/2006

DAVIDSON, DAVIDSON & KAPPEL, LLC  
485 SEVENTH AVENUE, 14TH FLOOR  
NEW YORK, NY 10018



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I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.

(Depositor's name)
(Signature)
(Date)

APPLICATION NO.	FILING DATE	INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/840,133	05/06/2004	Albrecht Weiss	5005.1078	7239

TITLE OF INVENTION: MICROSCOPE AND MICROSCOPY METHOD FOR PRODUCING OVERLAY IMAGES

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$300	\$1700	06/01/2006

EXAMINER	ART UNIT	CLASS-SUBCLASS
NGUYEN, THONG Q	2872	359-386000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). <input type="checkbox"/> Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. <input type="checkbox"/> "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.	1. Darby & Darby 2. 3.
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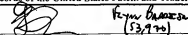
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) **Rec. 11/15/05 R/F: 017223/0863**  
PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.  
(A) NAME OF ASSIGNEE **Leica Microsystems CMS GmbH Wetzlar, Germany**  
(B) RESIDENCE: (CITY AND STATE OR COUNTRY)

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are enclosed: <input checked="" type="checkbox"/> Issue Fee <input type="checkbox"/> Publication Fee (No small entity discount permitted) <input type="checkbox"/> Advance Order - # of Copies	4b. Payment of Fee(s): <input checked="" type="checkbox"/> A check in the amount of the fee(s) is enclosed. \$1700.00 <input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached. <input checked="" type="checkbox"/> The Director is hereby authorized by check the required fee(s), or credit any overpayment, to Deposit Account Number <b>04-0100</b> (enclose an extra copy of this form).
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5. Change in Entity Status (from status indicated above)  
☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature  Date **5-30-2006**  
Typed or printed name **Erik R. Swanson** Registration No. **40,833**

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